Risk Reduction Program

- HIV prevention services specifically developed for young gay and bisexual men, as well as transgender youth
- HIV care services include case management, medical care, and mental health
- Behavioral, treatment, and community research focused on HIV prevention and care
Learning Objectives

• Increase knowledge of local and national HIV data

• Identify at least one way IPV impacts an individual’s risk for HIV

• Identify at least one way IPV impacts an individual’s ability to access and adhere to HIV care
HIV Care Continuum

HIV Care Continuum Shows Where Improvements are Needed

In the US, 1.2 million people are living with HIV. Of those:

- Diagnosed: 86%
- Engaged in Care: 40%
- Prescribed ART*: 37%
- Virally Suppressed: 30%

Sources: CDC National HIV Surveillance System and Medical Monitoring Project, 2011.

*Antiretroviral therapy

Courtesy of aids.gov
HIV Care Continuum, LAC 2013

Estimated Diagnosed Linked Engaged in Care Retained in Care Virally Supressed

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%
HIV/AIDS in Los Angeles County

New HIV Diagnoses in 2010-2012 by ZIP code and Service Planning Area (SPA) in Los Angeles County (N=5,958)

Source: DHSP Annual HIV Surveillance Report, data as of December 2013
Current Age of Persons Living with HIV in LAC, as of December 2013 (n=47,148)

Median Age = 48 Years

Source: DHSP Annual HIV Surveillance Report, data as of December 2013
New HIV Diagnoses by Age Group
Los Angeles County, 2012\(^1\) (n=1,911)

Age group (years)

- <13: 1%
- 13-19: 4%
- 20-29: 35%
- 30-39: 28%
- 40-49: 21%
- 50-59: 9%
- 60+: 3%

1. Data are provisional due to reporting delay.

Source: DHSP Annual HIV Surveillance Report, data as of December 2013
Comparison of Persons Living with HIV at Year-end 2013 and HIV Diagnoses in 2012, by Race/Ethnicity, LAC

Living with HIV in 2013
- White: 41%
- Black: 33%
- Other: 20%
- AI/AN: 1%
- Asian/PI: 1%

Diagnosed in 2012
- White: 49%
- Black: 23%
- Other: 21%
- AI/AN: 5%
- Asian/PI: 1%
Comparison of Persons living with HIV at Year-end 2013 and HIV Diagnoses in 2012, by Transmission Risk Category\(^1\), LAC

Living with HIV in 2013

- MSM: 10%
- IDU: 6%
- MSM/IDU: 5%
- Heterosexual Contact: 1%
- Other\(^2\): 1%
- Mother with/at Risk for HIV: 77%

Diagnosed in 2012

- MSM: <1%
- IDU: 3%
- MSM/IDU: 4%
- Other\(^2\): 8%
- Heterosexual Contact: <1%
- Mother with/at Risk for HIV: 85%

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1. Persons with undetermined transmission category assigned risk factor using multiple imputation (MI) methods.
2. Other risks include hemophilia, coagulation disorder, blood transfusion, and risk factor not reported/identified.

Source: DHSP Annual HIV Surveillance Report, data as of December 2013
Estimated HIV Prevalence among Transgender Women in Los Angeles County (2012)

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Estimated # HIV Cases</th>
<th>Estimated Population Size</th>
<th>Estimated HIV prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black</td>
<td>324</td>
<td>671</td>
<td>48.3%</td>
</tr>
<tr>
<td>Latina</td>
<td>595</td>
<td>3,470</td>
<td>17.1%</td>
</tr>
<tr>
<td>White</td>
<td>88</td>
<td>1,912</td>
<td>4.6%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>39</td>
<td>1,053</td>
<td>3.7%</td>
</tr>
<tr>
<td>Native American</td>
<td>29</td>
<td>108</td>
<td>26.9%</td>
</tr>
<tr>
<td>Total</td>
<td>1,088</td>
<td>7,214</td>
<td>15.1%</td>
</tr>
</tbody>
</table>
Social Determinants of Health

The conditions and circumstances into which people are born, grow, live, work, socialize, and form relationships and the systems that are in place to deal with health and wellness.
Social Determinants of Health

- Power, wealth, discrimination, stigma, oppression, -phobias, -isms
- Housing, employment, health care, transportation, and other resources
- Relationships with family, friends, peers, partners, neighbors, and other people in an individual’s social and sexual networks
Discussion
Impact of IPV on HIV Risk

- Negotiating safer sex practices
- Ability to access health screening services
- Control of information access
- Coping mechanisms
  - Substance use
  - Sex with other partners
Impact of IPV on HIV Care

Coercion and Threats
- Non-consensual disclosure
- “No one else will love you…”

Isolation
- Preventing from accessing care
- Control over communication with health team
- Limiting social support

Blaming
- Blame for HIV status
Impact of IPV on HIV Care

Reactions to Abusive Behavior

- Survival = Primary concern, Health = secondary
- Fear of partner finding out HIV status
- Inconsistent engagement and adherence to care
- Conditioned to withhold information from providers for safety/survival
Discussion:
Best Practices
“If we aren’t intersectional, some of us, the most vulnerable, are going to fall through the cracks.”

~ Kimberle Williams Crenshaw
Thank you!

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